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HACKETTSTOWN REGIONAL MEDICAL CENTER

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ED
(Scope)

TITLE: **PROTOCOL FOR THE CARE OF THE ED PATIENT WITH IMPAIRMENT OF SKIN INTEGRITY-ACTUAL, (LACERATIONS, PUNCTURE WOUNDS, ABRASION, AVULSIONS).**

PURPOSE: To outline the care of the ED patient with a laceration, puncture wound, abrasion and avulsion.

LEVEL: ___ Dependent ____ Interdependent ____ Independent

SUPPORTIVE DATA:

CONTENT:

TRIAGE
All patients who are bleeding are checked in triage by an RN and classified according to age, amount of bleeding and area injured. Obtain tetanus history.

ASSESSMENT
Obtain history of injury including date, time and mechanism of injury. Integumentary status: color, turgor, temperature, sensation, moisture and hygiene.
Musculoskeletal status: muscle strength or weakness, range of motion, mobility. Size and shape of skin disruption, invasion of other body structures.

ASEPSIS
Patient will be soaked in appropriate aseptic solution, when indicated and ordered by MD, in appropriate size basin. If area does not lend itself to soaking, cleanse wound with appropriate antiseptic/surfactant with sponge or brush for time ordered by physician.

CONTROL OF BLEEDING
Direct pressure will be applied with sterile, bulky dressings.

WOUND CLOSURE
ED physician will determine appropriate method of closure (i.e., suture, steri strip, dermabond).

DRESSING
Apply ointment as ordered by physician, and dry, sterile dressings; adaptic or xeroform dressings will be used when appropriate.

PATIENT EDUCATION
Printed wound care will be reviewed with the patient or the significant other. The patient should verbalize the understanding of these instructions. A copy of the instructions will be given to the patient or significant other.

DOCUMENTATION
Chart to protocol.
Chart to patient's reaction to treatments.
Chart any deviations to protocol.

Reference: Lippincott Manual of Nursing Practice, 8th Edition.